

SCHUYLER HOSPITAL NURSE STAFFING PLAN 2023

Nurse Staffing Plan Purpose

This plan was developed for the management of scheduling and provision of daily staffing needs for the hospital, and to define a process that ensures the availability of qualified nursing staff to provide safe, reliable and effective care to our patients, while improving throughput. This plan applies to all hospital patient care units.

Nurse Staffing Plan Principles

- Access to high-quality nursing staff is critical to providing patients safe, reliable and effective care.
- The optimal staffing plan represents a partnership between nursing leadership and direct nursing care staff.
- Staffing is multifaceted and dynamic. The development of the plan must consider a wide range of variables. Including but not limited to skill mix, measures of acuity and intensity of all patients; nature of care delivered on each unit and shift, and the need for specialized or intensive equipment.
- Data and measurable sensitive quality indicators should help inform the staffing plan.
- Nurse staffing and Nurse-sensitive patient outcome indicators will be available upon request. Requests for this information will be responded to in accordance with NYCRR 400.25.

*These principles correspond to *The American Nursing Association Principles of Safe Staffing*

Nurse Staffing Plan Policy

- The Nurse Staffing Committee is responsible for the development and oversight of the nurse staffing plan to ensure the availability of qualified nursing staff to provide safe, reliable and effective care to our patients.
- The committee's work is guided by its charter
- The committee meets on a regular basis as determined by the committee's charter.
- The committee's work is informed by information and data from the individual patient care units. Appropriate staffing levels for a patient care unit reflect an analysis of:
 - Individual and aggregate patient needs;
 - Staffing guidelines developed for specific specialty areas;
 - The skills and training of the nursing staff;
 - Resources and supports for nurses;
 - Anticipated and unanticipated absences and need for nursing staff to take meals and rest breaks;

- Hospital data and outcomes from relevant quality indicators; and
- Hospital finances
- Addressing staff concerns

*The American Nursing Association does not recommend a specific staffing ratio, but rather to make care assignments based on acuity, patient needs, and staff competency.

- The analysis of the above information is aggregated into the hospital’s nurse staffing plan.
- The committee will perform an annual review of the staffing plan. If changes are made to the staffing plan throughout the calendar year, an updated staffing plan will be submitted to NYSDOH.

Nurse Staffing Plan Scope

The following areas of the hospital are covered by the nurse staffing plan:

- Inpatient Unit
- Emergency Department
- Surgical Services
- Outpatient Clinics

Nurse Staffing Plan Critical Elements

- Nursing Staffing Committee representation will be shared equally between direct patient care representation and hospital leadership.
- The Staffing Committee will review, assess and respond to reports, concerns and comments communicated to the committee in writing via a form or email to chairperson(s).
- The Staffing Committee will track complaints reported to the committee to include the resolution of each complaint.
- The hospital will submit the staffing plan annually and when changes are made.

Emergency Preparedness

In the case of an unforeseeable emergency circumstance such as any officially declared national, state, or municipal emergency; when the Cayuga Health System (CHS) Comprehensive Emergency Operations Plan (CEMP) is activated; or any unforeseen disaster or other catastrophic event that immediately affects or increases the need for health care services, the CHS Clinical Staffing Plan will be waived. Clinical leadership will refer to the CHS Crisis Standards of Care (CSOC – also known as the Surge and Flex) plan, sections for staffing and documentation for scheduling until the event no longer affects or the increased need returns to normal health care services.

Inpatient Unit Staffing Plan

Description

The inpatient unit is a 16 bed unit, 12 private and 2 semiprivate rooms, located on the ground floor adjacent to the surgical services department and the emergency department. The unit has two nursing stations, medication room, two clean storage rooms, dirty utility room, and equipment storage. The budgeted average daily census of the unit is 13. There is a combination of acute care patients, observation patients and swing bed patients. Activities of the inpatient unit include but are not limited to discharges, admissions, and transfers.

Patient Population

The inpatient unit provides a combination of routine and moderate acuity care for medical surgical patients. The most common medical diagnoses but are not limited to COPD, Congestive Heart Failure, Sepsis and Pneumonia. Post-operative patients are rare and typically are extended care patients needing pain or symptom control. Swing Bed patients typically are in need of physical, occupational or speech therapy for ambulatory dysfunction, post CVA and total joint replacement, and long term antibiotic therapy or wound care.

Schuyler Hospital will review and consider other characteristics of the units or community patient population, including but not limited to age, cultural or linguistic diversity and needs, functional ability, communication skills, and other relevant social or socioeconomic factors.

Support Staff

- Occupational, Speech, and Physical Therapy
- Respiratory Therapists are available 24 hours a day.
- A Pharmacist is available from 7:30 – 16:00 Monday through Friday with remote pharmacy services available for those hours when no pharmacist is in house.
- There is a hospitalist in house 7:30 – 16:00 Monday through Friday and on call 24/7 when not in house. The emergency room provider is available to support staff 24/7 when no hospitalist is in house.
- Chaplain services are available on call.
- Social Services are available Monday through Friday 7:30 – 16:00
- The use of available float pools developed and used across the hospital and the system

Competency

Staff includes RNs, LPNs, Nurse Assistants and Unit Clerks. All staff completes initial competency as well as annual competencies. All nurses are required to have current ACLS and PALS certification. All support staff are required to have current BLS certification.

Meal and Rest Breaks

The hospital is committed to ensuring staff is able to take meals and rest breaks as required by law. The committee considers breaks and strategies to ensure breaks when developing a plan for each unit. The global break policy may be used, or individual patient care units may have discretion in structuring breaks to meet specific needs while meeting the requirements of the law. This committee, to help develop strategies to ensure staff is able to take breaks, will review data regarding missed or interrupted breaks.

Planned and Unplanned Leaves

Schuyler Hospital employs per diem staffs, who are hired to cover open shifts. If there are no per diem staff available, non-overtime part-time staff can choose to cover open shifts. And, if the shift is not covered by per diem, part-time, or full time staff can choose to sign up and cover the open shift.

A Charge Nurse is assigned 24 hours a day.

During periods of high census and/or boarding of patients in the Medical/Surgical Department, the Charge Nurse collaborates with the Hospital Supervisor to determine staff resources available from other departments to be deployed in the Medical/Surgical Department, or to assist in patient throughput.

Nursing Supervisor needs to coordinate care but following chain of command; this may include manager/ director, if situations call for limiting patient number, Admin on Call (AOC) must be called.

All suicidal patients requiring 1:1 monitoring will receive CMS required monitoring. Med/Surg Dept. will first use and/or assess its ability to staff with Med/Surg Dept. employees. Every effort is made to obtain additional resources for patients requiring behavioral observation every 15-minute checks or 1:1 monitoring.

Staffing Matrix

MS	DAY SHIFT 7A-3P			EVENING SHIFT 3P-11P			NIGHT SHIFT 11P-7A		
	RN/LPN	CNA	UC	RN/LPN	CNA	UC	RN/LPN	CNA	UC
12-16	3	2	1	3	3	1	3	1	0
8-11	2	2	1	2	3	1	2	1	0
4-8	2	1	1	2	2	1	2	0	0
1-4	2	0	1	1	2	1	2	0	0

Emergency Department Staffing Plan

Description

The Emergency Department of Schuyler Hospital is a 6-bed unit with a nursing station, medication room, clean, and dirty utility room located on the ground floor adjacent to the surgical services department and the inpatient unit offering 24-hour care for all ages. It serves Schuyler County and surrounding service areas including contiguous counties of Yates, Chemung, Steuben and Tompkins. As the only hospital in the county, Schuyler receives all patients and serves as medical control for the area. The budgeted average daily census of the unit is 20. The purpose of the Emergency Department is to provide medical care to all patients who perceive they have an emergency medical condition. The ED is responsible for the immediate treatment of any medical or surgical emergency, initiating lifesaving procedures and for providing emergency care for other conditions, including chronic medical conditions as well as minor injuries and illness. Depending on patient condition and need for specialty services not available at Schuyler Hospital, patients will be transferred to an appropriate hospital to provide the level of care needed.

Staffing

Schuyler Hospital's Emergency Department budgeted census for 2023 is 20.

Historical data of patient arrival times and length of stay is used to determine number of staff and start times for the department.

A Charge Nurse is assigned 24 hours a day.

During periods of high census and/or boarding of patients in Emergency Department, the Charge Nurse collaborates with the Hospital Supervisor to determine staff resources available from other departments to be deployed in the Emergency Department, or to assist in patient throughput. All suicidal patients requiring 1:1 monitoring will receive CMS required monitoring. ED will first use and/or assess its ability to staff with ED employees. Every effort is made to obtain additional resources for patients requiring behavioral observation every 15-minute checks or 1:1 monitoring.

An Emergency Department provider is on duty in the Department 24 hours a day.

Case Manager is available Monday through Friday 07:30-16:00 except holidays and weekends.

Support Staff

- Emergency Tech
- Registration Clerks
- Respiratory Therapists are available 24 hours a day.
- A Pharmacist is available from 7:30 – 16:00 Monday through Friday with remote pharmacy services available for those hours when no pharmacist is in house.
- Chaplain services are available on call.

- Case manager are available Monday through Friday 7:30 – 16:00

Competency

Staff includes RNs and ED Techs. All staff completes initial competency as well as annual competencies. All nurses are required to have current ACLS and PALS certification. All support staff are required to have current BLS certification.

Meal and Rest Breaks

The hospital is committed to ensuring staff is able to take meals and rest breaks as required by law. The committee considers breaks and strategies to ensure breaks when developing a plan for each unit. The global break policy may be used, or individual patient care units may have discretion in structuring breaks to meet specific needs while meeting the requirements of the law. This committee, to help develop strategies to ensure staff is able to take breaks, will review data regarding missed or interrupted breaks.

Planned and Unplanned Leaves

Schuyler Hospital employs per diem RNs who are hired to cover open shifts. If there is no per diem nurse's available, non-overtime part-time RNs can choose to cover open shifts. And, if the shift is not covered by per diem or part-time RNs, full time RNs can also choose to sign up and cover the open shift.

Staffing Matrix

Shift	Charge RN	RN	ED Tech
0700-1900	1	1	
1000-2200			1
1900-0700	1	1	

Surgical Services Staffing Plan 2023

Purpose:

The purpose of the Surgical Services Staffing Plan is identify and set forth guidelines to help the department optimize the utilization of its resources and best serve our patients and to provide safe quality patient care.

Description:

Surgical Services includes Ambulatory Surgery (Pre- and Post-Operative Area), Operating Rooms, Special Procedures, PACU, and Sterile Processing. The Surgical Services Department is located adjacent to the Medical Surgical Dept., Radiology dept., and the Emergency Dept. The department has a clean room, sterile storage room, sub-sterile room, two equipment rooms, three dirty utility rooms, and offices.

Ambulatory Surgery: Admits all same day patients; receives same day patients on return from PACU, OR (special procedures) **For Post-Operative Care & Discharged 0700-1530 Mon-Fri (4 bays)**

Operating Room: Two operating rooms provide scheduled surgical care for Orthopedic, Pain Management, ENT, and veins. **Scheduled cases: 0800-1400 Mon-Fri**

Special Procedures: One Special Procedures Room for performing Endoscopy and Miscellaneous procedures. **Scheduled Cases: 0800-1400 Thurs**

Sterile Processing: One room designated soiled and clean containing specialized cleaning and sterilizing equipment provide decontamination, disinfection, and sterilization of surgical, clinical, and hospital-wide equipment & instruments. **Mon-Fri 0700-1530**

Post Anesthesia Care Unit: One Recovery Room with 3 bays capacity, providing intensive monitoring and nursing assessment/care following anesthesia/surgery. **Mon-Fri 0800-1530**

Pre-op Office: A Pre-operative office is open Monday through Friday 0700-1530. Assures the patient is ready for surgery, coordinates, and provides information to the anesthesiologist and surgeon.

Summary of services and case types:

ORTHOPEDECS

- Arthroscopy: shoulder with sub acromial decompression, distal clavicle, resection rotator cuff repair, SLAP repair, anterior reconstruction; and knee with meniscal resection & repairs and ACL reconstruction, wrists, and ankles foreign bodies
- Fractures: wrists, hands, arms, shoulders, and ankles
- Hand/Arm surgeries including Carpal tunnel releases, triggers, and ulnar nerve transposition, etc.
- Tendon repairs

PAIN MANAGEMENT

- Radio Frequency Ablations: Cervical, Lumbar, and Genicular knees
- Stimulators: Trial and Permanent

- Blocks with required sedation

ENT

- Adenoids and tonsils
- Ears: tubes and reconstruction of ear drum
- Excisions of neck lumpectomies
- Fess: Sinus copies, removal of turbinates

Gastroenterology

- Colonoscopies: Biopsies, Polypectomies, tattooing procedures
- Endoscopies: Biopsies, Polypectomies, Tattooing procedures

Veins

- Phlebotomies
- Radio Frequencies veins

Staffing:

All RNs are skilled to cover Pre-op, post-op, special procedures, OR, and PACU as needed. Staffing will change as the need arises. Techs and RNs are assigned from any of the departments, when orientation is completed. All assignments are made prior to the start of the surgical/procedure day will reassess as needed.

The OR suite includes two Operating Rooms and one Special Procedures room. Staffing is for an eight-hour day, five days a week with 24-hour emergency coverage. The OR is staffed with Registered Nurses and OR Technicians.

Staffing (Pre-op, OR, and PACU): Month process depends a clinical day -

Staff	Monday	Tuesday	Wednesday	Thursday	Friday
RN 0700-1530	4	4	4	4	4
OR Tech 0700-1530	1	1	1	1	1
Sterile Processing Technician	1	1	1	1	1
EVS	1	1	1	1	1
Transports Aide/WC	1	1	1	1	1

Anesthesiologist: Provide Anesthesia in surgery Mon – Wed 0730-1530

Surgical Services has a director that covers all aspects of the department.

Meal and Rest Breaks:

The hospital is committed to ensuring staff is able to take meals and rest breaks as required by law. The committee considers breaks and strategies to ensure breaks when developing a plan for each unit. The global break policy may be used, or individual patient care units may have discretion in structuring breaks to meet specific needs while meeting the requirements of the law. This committee, to help develop strategies to ensure staff is able to take breaks, will review data regarding missed or interrupted breaks. – Relieving scrub person in specialty areas and look at the whole month

Planned and unplanned Leaves:

Schuyler Hospital employs per diem RNs who hired to cover open shifts and assists with relief with lunch and rest breaks. In the event there is no per diem nurse available, non-overtime part-time RNs can choose to cover open shifts. And if the shift is not covered by per diem and non-overtime part-time RNs, full time RNs can also choose to sign up and cover the open shift.

Support Staff:

Respiratory Therapy

Pharmacy

Radiology

Laboratory

Nursing Supervisors

Required Certifications:

All Registered Nurses are required to Maintain ACLS and PALS certification. All staff is required to be BLS certified.

Pediatric patient's process and supervisor process

Charge Nurse Role will be the float

Outpatient Clinics Staffing Plan

Description

The outpatient clinics are a designated Rural Health Clinic which consists of Primary Care with 19 exam rooms, Specialty Clinic with 4 exam rooms, and Ovid Primary Care with 4 exam rooms. The Primary Care and Specialty Clinic are located within the main campus of the hospital for ease of access to ancillary services. The Ovid Primary Care is a satellite office that is within the Critical Access Hospital/Rural Health Clinic designation for Schuyler Hospital.

Staffing

Clinical staff within the clinic consists of RN's, LPN's, and Medical Assistants. The clinic is open from 730am-5pm Monday through Friday. RN's in the clinic setting perform duties that are not face to face patient interactions unless there is a specific need due to specialty.

Competency

All clinical staff completes initial competencies as well as annual competencies. The clinical staff is required to have current BLS certification and ACLS certification as appropriate.

Meal and Rest Breaks

The hospital is committed to ensuring staff is able to take meals and rest breaks as required by law. The committee considers breaks and strategies to ensure breaks when developing a plan for each unit. The global break policy may be used, or individual patient care units may have discretion in structuring breaks to meet specific needs while meeting the requirements of the law. This committee, to help develop strategies to ensure staff is able to take breaks, will review data regarding missed or interrupted breaks.

Planned and Unplanned Leaves

Schuyler Hospital employs per diem staffs who are hired to cover open shifts. If there is no per diem staff's available, non-overtime part-time staff can choose to cover open shifts.

Staffing Matrix

Shift	RN	LPN	Medical Assistant
730-1600	1	2	1
800-1630	2	1	2
830-1700	2	2	1
Total	5	5	4